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APPLICANTS Carl A. Caspers, Avon, MN; Maitland C. MacKenzie, Sauk Rapids, MN;				
** CONTINUING DATA ***** This application is a CIP of 09/785,714 02/16/2001 PAT 6,726,726 which is a CIP of 09/492,406 01/27/2000 PAT 6,508,842 which is a CIP of 09/325,297 06/03/1999 ABN				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 04/04/2002				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		STATE OR COUNTRY MN	SHEETS DRAWING 14	TOTAL CLAIMS 15
Examiner's Signature _____ Initials _____				INDEPENDENT CLAIMS 2
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TITLE PLATE/SOCKET ATTACHMENT FOR ARTIFICIAL LIMB VACUUM PUMP				
FILING FEE RECEIVED 670	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	